

NOTES FROM THE MEDICAL PRESS

IN CHARGE OF

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THE TREATMENT OF RINGWORM.—Surgeon-Major R. E. Wrafter, Bengal Medical Service (retired), says in the *Indian Medical Record* that in a case of suspected ringworm of the head the affected parts should be well washed daily with soft soap and tepid water until it can be decided if the disease is really ringworm. Then all hair in the vicinity should be either clipped close to the scalp or thoroughly shaved, after which the great object is the removal of the diseased hair, which should be carefully depilated with a pair of broad-nibbed forceps. Unless this is done very gently the fragile hair will break and the roots remain. Subsequently every particle of scurfiness should be washed away with carbolic soap and warm water, and an ointment consisting of carbolic acid, citrine ointment, sulphur ointment, equal parts, mixed, may be freely applied night and morning with excellent results.

It causes no pain; for children under ten years of age, double the quantity of sulphur ointment. Some practitioners employ chrysophanic acid ointment (1 in 10) rubbed into the affected parts twice a day, or paint the patches with strong acetic acid about every third or fourth day, and apply diluted citrine ointment in the intervals.

In all cases the local treatment must be conjoined with constitutional remedies, since the spores of these parasitic plants find their most congenial nidus in weakly children. The child should be taken away from its books, allowed to be much in the open air, fed well upon plain, nourishing food, warmly clothed, and be strengthened by tonics, such as iron, quinine, and cod-liver oil.

TONSILLITIS AN INFECTIOUS DISEASE.—Walter Sands Mills declares in the *Medical News* that all catarrhal diseases of the nose and throat are more or less contagious. He defines an infectious disease as one that can be transmitted from person to person; one in which, in many cases, there is a definite history of exposure, followed by a period of incubation before the onset of symptoms in the new patient; or a disease one or more stages of which may be contagious, and set up a similar train of symptoms in a previously well person. The writer says that his reason for classifying tonsillitis as an infectious disease is based solely on its clinical history. There is no known specific bacillus for tonsillitis. He then reports a series of cases which will show the contagiousness of the disease. One attack predisposes to another. It is often found associated with many of the other infectious diseases. Mills suggests that it be called an acute infectious disease with local manifestations. Every patient with this disease should be isolated at once, put to bed, and placed on a liquid diet. For local treatment a gargle of cheap claret wine is used every two or three hours. At the very onset aconite in small doses, often repeated, is frequently of service, but not in the follicular stage. If there is intense congestion of the throat and high fever,

a one per cent. solution of belladonna is the best remedy. In follicular tonsillitis the best remedy is phytolacca. The writer uses drop doses and one per cent. solution every one or two hours. Its action is almost specific. If suppuration has already begun when the case applies for treatment, sulphide of calcium in 1 in 100 grain doses is the best remedy for clearing it up. The writer, in his experience, has never had a case go on to suppuration.

VERATRUM VIRIDE AS AN ANTITOXIC.—In an article in the *Medical News* Dr. A. B. Isham says he believes veratrum viride to be an antidote to many poisons. He is in the habit of giving from fifteen to thirty drops of Norwood's tincture by hypodermic injection, and considers that, so given, the drug is practically free from danger. Such injections will usually produce very copious perspiration and salivation, retching, and vomiting of bile and mucus. In addition to this, high temperature and pain, if present, will disappear. Nine cases are reported to show the antitoxic virtues claimed for the drug. The first case is one of eclampsia. The woman got thirty-five drops of veratrum viride in the course of one hour: the convulsions soon ceased and a normal labor was followed by a normal puerperium. The second case reported is one of "pneumococcus infection," in which twenty-five drops of the tincture did away with the infection in about three hours. The fourth case is one of carbolic acid poisoning. This patient got twenty drops of Norwood's tincture, but there being no response to the drug in half an hour, fifteen more drops were given. Some hours later it was shown that the patient had probably swallowed about two ounces of pure carbolic acid. "During the time she was under the influence of the poison the veratrum viride procured the evacuation of more than two quarts of bile and mucus. Without its aid there would unquestionably have been a fatal result." These are the three most brilliant cases. The remainder of the paper is devoted to a discussion of the cases and to an exposition of the physiological action of veratrum viride.

GRAPE-JUICE AND THE TYPHOID BACILLUS.—In a recent weekly report of the Chicago Board of Health it is stated that a study of the action of fruit juices upon the typhoid bacillus has brought out the interesting fact that while lime-juice, apple-juice, and the juice of the grape-fruit all had a more or less inhibiting effect on the growth or vitality of these bacilli, bottled grape-juice gave the most conclusive results. Cultures of the typhoid and the colon bacilli were used to infect both distilled water and water from the laboratory tap in a strength of about ten million bacilli to a cubic centimetre. Bottled grape-juice was then added in proportions varying from one to five per cent. Examinations made at one-minute intervals showed that some brands had killed the germs at the end of the first minute, the effect being almost instantaneous. The advantage of bottled grape-juice, it is said, is that the quantity required—one per cent.—does not affect the flavor of the water or disturb digestion, as lemon-juice does with some individuals. The freshly extracted juice of the grape prepared in the laboratory had no effect on the bacilli, even in a proportion as high as one hundred per cent.

SCARLET FEVER.—Sutherland, in the London *Lancet*, questions the possibility of conveyance of scarlet fever by individuals passing from the sick to the well. He has been looking for such a case for several years, but without success.

He has had in special investigation, which he here reports, eighty-two different subjects concerned. In thirty-four households a very well-intentioned attempt at isolation was begun and maintained for periods ranging between twenty-one and forty-three days, but in each case was ultimately a failure, and the well children came in contact with the patient, with the result of spreading the disease. In forty-eight cases the sick children were isolated absolutely from the other children in the family, though the different mothers had to pass constantly from one to the other, doing the housework as well as attending the sick. In none of these cases was there any extension of the disease from the sick to the well.

FORMALIN.—The *Journal of the American Medical Association*, quoting from the *Hot Springs Medical Journal*, says: "Jelks speaks very highly of the use of formalin in various conditions. He does not think it more irritating than other agents that are employed. He finds it of special value in suppurations, ulcers, gonorrhœa and infected wounds, in postpartum infections, and certain skin diseases, such as tinea, etc. He thinks that a stronger solution should not be used in clean, open wounds or in skin granulations. Its use on the skin at the point of proposed incision is good practice and insures sterilization. In rectal surgery there is no other antiseptic so reliable. He has not had with it nearly so large a percentage of fistulæ from perirectal abscess as the statistics of authorities give, and believes if the case is operated on and dressed each day after formalin irrigation fistulæ will hardly occur. In chronic dysentery he uses hot formalin solution to cleanse the mucous surfaces with good results."

NEURASTHENIA IN CHILDREN.—Dr. J. Madison Taylor, in the *International Medical Magazine*, thinks neurasthenia in children is not rare, as shown by lack of energy and of interest in the ordinary pursuits of childhood, and is likely to be confused with the effects of bad habits, hysteria, and mendacity. The physician should always keep the psychic factor in view. Eye-strain is especially noted as a cause and should be looked for. Cardiac neuroses are common in children. The heart, lungs, blood, and kidneys should be attended to. The child should have plenty of air, which is one of the best tonics. All outings and exercise should be supplemented by rest, and the whole daily life of the child should be looked after. Proper food of a sufficient variety, bathing, sponge-baths in warm room before breakfast, sometimes rest in bed for a few days to a week, and following a strict schedule of feeding may be beneficial.

WEAK INFANTS.—The *Philadelphia Medical Journal*, quoting from a French source, says: "Formerly most weak infants, weak at birth, died. Now when an infant has a subnormal temperature it is given a bath at one degree above its temperature. This is repeated, the temperature rising after each bath, always given at one degree above the baby's temperature. Then the infant will take more nourishment and grow. Incubators may also be of use. The lower the temperature and body-weight, the higher is the mortality. Infections occur easily. Budin had but fifty-nine deaths among five hundred and seventy-nine such infants. With careful attention, many weak infants will grow up into well, strong men."